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Atty Docket No. 16869Q-092400U:

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Varsha A. Kapadia

Group Art Unit 26:5

**OFFICIAL COMMUNICATION**  
**FOR THE PERSONAL ATTENTION OF**  
**EXAMINER VARSHA A. KAPADIA**

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following documents in re Application of Joe M. Poss, Application No. 10/788,433, filed February 27, 2004 for EFFICIENT LOW DROPOUT LINEAR REGULATOR are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. SB/21 Transmittal Form (1 page)
2. SB/17 Fee Transmittal (in duplicate) (2 pages)
3. SB/22 Extension of Time (in duplicate) (2 pages)
4. Amendment (12 pages)
5. Terminal Disclaimer (1 page)

Number of pages being transmitted, including this page: 19

Dated: October 18, 2006

  
Krista K. Merrimac

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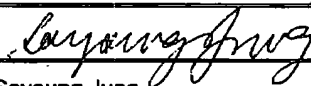
TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, CA 94111-3834  
Telephone: 415-576-0200  
Fax: 415-576-0300  
2825

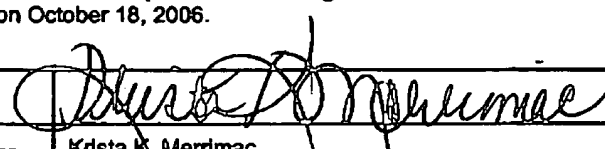
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PTO/SB/21 (07-08)

|  |                        |                   |
|--|------------------------|-------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br><small>(to be used for all correspondence after initial filing)</small> | Application Number     | 10/788,433        |
|  | Filing Date            | February 27, 2004 |
|  | First Named Inventor   | Poss, Joe M.      |
|  | Art Unit               | 2655              |
|  | Examiner Name          | Varsha A. Kapadia |
|  | Attorney Docket Number | 16869Q-092400US   |
| Total Number of Pages in This Submission   |                        | 19                |

| ENCLOSURES (Check all that apply)   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input checked="" type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Facsimile Transmittal |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |   |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  |   |  |
| Firm Name   | Townsend and Townsend and Crew LLP  |  |
| Signature   |    |  |
| Printed name  | Soyoung Jung  |  |
| Date  | October 18, 2006  | Reg. No. 58,249  |

| CERTIFICATE OF TRANSMISSION/MAILING   |                    |                        |
|---|--------------------|------------------------|
| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No 1-571-273-8300 on October 18, 2006. |                    |                        |
| Signature:   |                    |                        |
| Typed or printed name   | Krista R. Merrimac | Date: October 18, 2006 |

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PTO/SB/17 (07-06)

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 330**Complete If Known**

|                      |                   |
|----------------------|-------------------|
| Application Number   | 10/788,433        |
| Filing Date          | February 27, 2004 |
| First Named Inventor | Poss, Joe M.      |
| Examiner Name        | Varsha A. Kapadia |
| Art Unit             | 2655              |
| Attorney Docket No.  | 16869Q-082400US   |

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES           |          | SEARCH FEES           |          | EXAMINATION FEES      |          | Fees Paid (\$) |
|------------------|-----------------------|----------|-----------------------|----------|-----------------------|----------|----------------|
|                  | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) |                |
| Utility          | 300                   | 150      | 500                   | 250      | 200                   | 100      |                |
| Design           | 200                   | 100      | 100                   | 50       | 130                   | 65       |                |
| Plant            | 200                   | 100      | 300                   | 150      | 160                   | 80       |                |
| Reissue          | 300                   | 150      | 500                   | 250      | 600                   | 300      |                |
| Provisional      | 200                   | 100      | 0                     | 0        | 0                     | 0        |                |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Small Entity Fee (\$) | Fee (\$) |
|-----------------------|----------|
| 50                    | 25       |
| 200                   | 100      |
| 360                   | 180      |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|
| 31           | 4            | \$50     | \$200         |

HP = highest number of total claims paid for, if greater than 20

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| 4             | 0            | \$200    | \$0           |

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 =      | / 50 =       | (round up to a whole number) x                   |          |               |

**4. OTHER FEE(S)**

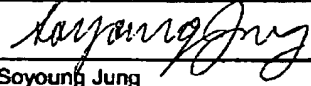
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer Fee

Fees Paid (\$)

130

**SUBMITTED BY**

|                   |   |  |                        |
|-------------------|---|--|------------------------|
| Signature         |  | Registration No. (Attorney/Agent) 58,249 | Telephone 415-576-0200 |
| Name (Print/Type) | Soyoung Jung  |  | Date October 18, 2006  |

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